Nova Scotia's Nursing Strategy

Update

March 2003

PUTTING IT INTO PRACTICE

Message from the Provincial Nursing Network

Leading into the second full year of the nursing strategy, the Provincial Nursing Network (PNN) members were clear of the work ahead in 2002-03.

We wanted to keep the momentum going for initiatives that had begun in year one: developing competitive and innovative recruitment strategies, supporting continuing and specialty education opportunities, and funding initiatives that help to improve the workplace.

As well, we wanted to move forward on new initiatives in 2002-03: RN re-entry program, funding more nursing school seats, developing a leadership conference and increasing availability in the third-year co-op program.

Another goal was to complete a review of the Canadian Nursing Advisory Committee report issued by the Advisory Committee on Health Human Resources in August 2002. Through this review, it was agreed that three issues addressed in the report – leadership, optimum scope of practice, and rural and remote nursing – should be considered key priority areas for Nova Scotia.

Left row from the top: Ann Mann, Ellie MacFarlane, Barb Downe-Wamboldt, Michelle Kucey, Peggy MacNeil, Heidi Greek-Hilchie. Middle row from the top: Barb Oke, Donna Denney, Heather Jewers, Linda Hamilton, Sara Campbell. Right row from the top: Janet Knox, Evelyn Schaller, Martha Brown, Janet Hazelton.

The group met six times in 2002-03. At its February 2003 meeting, the group met with Health Minister Jane Purves. New to her portfolio, Ms. Purves showed great interest in hearing about the efforts of the nursing strategy, some of the challenges facing nursing as well as the need to have continued government support for nurses even beyond the scope of the nursing strategy.

In conclusion, a great deal of work was accomplished by the PNN as a resource to and advisory body for the Nursing Policy Advisor, Barb Oke and the government of Nova Scotia.

The varied membership gives the network its strength and credibility to perform its role well. The membership comprises employers, educators, unions, regulatory bodies and practising nurses. A list of PNN members is on the final page.

Message from Barb Oke, Nursing Policy Advisor

"Nurses are the cornerstone of a healthcare system that is currently beset by challenges, problems and opportunities. Twenty-four hours a day, seven days a week, whether in community health centres, metropolitan teaching hospitals or isolated nursing stations, nurses are often there first when Canadians are in need of care." (2002, Final Report of the Canadian Nursing Advisory Committee, p. 8)

For the past two years, Nova Scotia's Nursing Strategy has helped to rebuild the nursing workforce in Nova Scotia.

This update shares some highlights of year two. Much of this work is also reflected in "Your Health Matters," a multi-year plan for health in Nova Scotia.

Your Health Matters details how nursing strategy funds and other government initiatives will result in $60 million to support nurses recruitment, retention and renewal activities between 2001-2007 (table on last page).

I would like to thank the Provincial Nursing Network and all registered nurses and licensed practical nurses who are facing the challenges, finding solutions and maximizing the opportunities.

Together, we are making a difference.

Recruitment

Through a multi-faceted approach, the nursing strategy continues to support employers in their efforts to recruit nurses. Initiatives include: attending recruitment fairs at home and across the country, providing financial assistance to nurses who wish to relocate to Nova Scotia, offering co-operative learning experiences to student nurses and providing programs to help nurses re-enter the workforce and upgrade skills.

2002-03 Job Fairs

In 2002-03, the nursing strategy funded recruitment teams attending four major job fairs across Canada and fairs focused on nursing students. The recruitment teams were made up of senior nursing and human resource specialists from various district health authorities, long-term care facilities and the IWK Health Centre. Having a strong profile on the national and international scene has helped us recruit over 100 nurses from outside Nova Scotia in 2002-03. ■

Paid Co-op Work Experience

Students can spend the summer months between their third and fourth years of nursing school working in a clinical setting while getting paid. This is another example of how Nova Scotia's Nursing Strategy invests in opportunities to benefit both future nurses and employers.

Clinical experience, in addition to the theory and practice offered during the school year, helps develop confidence and hone students' skills. As well, nursing students are distributed across the province to show them the variety of clinical settings and employment opportunities available post graduation.

Employers like the partnership too. Not only are additional nurses helpful with some clinical work, this is a chance for the employer to recruit future staff. This program is especially attractive to districts that may have difficulty recruiting new graduates to rural settings.

"Recruitment to rural practice can be challenging but having co-operative work experience positions funded by the provincial nursing strategy has assisted Cumberland County in showcasing our care settings to future registered nurses. We have had six third-year nursing students with co-operative work opportunities to date. It has been positive and rewarding for both students and the staff involved," says Cheryl Howell, vice president of Patient Care Services, Cumberland District Health Authority.

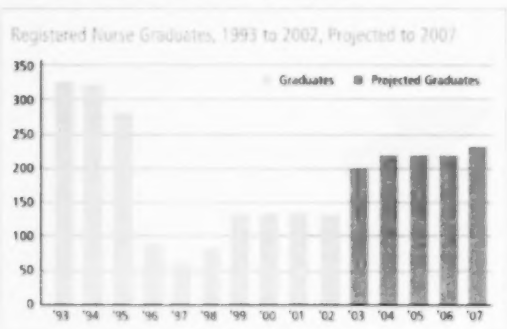
The number of co-op positions sponsored by Nova Scotia's Nursing Strategy has doubled since 2001, from 60 to 120 in 2003. ■

More Students = More Nurses

Increasing the number of nurses available to employers is a key element to recruitment. In 1999, 75 additional RN nursing student seats were funded, doubling the number of graduates compared to 1998.

Building on these efforts, an investment of $7.1 million will result in 240 more nurses being trained. Beginning in May 2003, 60 more nurses will be trained each of the next four years in three ways:

- 25 additional seats in the joint nursing program between St. F.X. and UCCB;
- 25 seats at St. F.X. in a new 20-month accelerated program; and
- 10 students can enrol in a new bridging program for LPNs to become RNs more quickly. ■



Relocation Allowances in the 2nd year of nursing strategy

	Top 5 - came from	Top 5 - NS destinations	Type of Positions
112 RNs and 1 LPN relocated to Nova Scotia with relocation allowances (up to $5000) from Nova Scotia's Nursing Strategy	Newfoundland & Labrador	Capital Health	99 - Permanent Full-Time
	Ontario	IWK Health Centre	9 - Permanent Part-Time
	USA various states	Annapolis Valley DHA	4 - Temporary Full-Time
	New Brunswick	Cape Breton DHA	1 - Unknown
	Alberta	Long-term Care	

Retention

Retaining our current workforce is a major priority of Nova Scotia's Nursing Strategy. We want to keep Nova Scotia nursing talent in Nova Scotia, continuing to help Nova Scotia patients and their families. In response to what nurses have told us they want, the nursing strategy has funded many opportunities for continuing education, skill development and other professional development opportunities. Here are some examples.

RN Professional Development Centre

Access to professional development is vital to maintaining nursing skills and to facilitating career advancement. Nurses across the province can access post entry-level, competency based specialty nursing education through the Registered Nurses Professional Development Centre.

Formerly known as the Provincial Post RN Program, the provincial nursing strategy helped the program change its name and develop a new visual identity and marketing approach to create new awareness among nurses.

Registered Nurses
Professional Development Centre

Located at the QEII site in Halifax, the Registered Nurses Professional Development Centre is open for business to nurses across the province.

Primarily offering programs in Critical Care Nursing and Perioperative Nursing, the centre is also able to respond to the needs in clinical settings.

One example is the development of a new program in Emergency Nursing. This program was introduced in 2003 with help from the nursing strategy, and is generating high demand. In fact, Valerie Banfield, faculty, says the Emergency Nursing program currently has 30 students enrolled, the highest number in any of the centre's programs.

The centre's specialty programs provide nurses with the knowledge and clinical foundation to improve competencies such as critical thinking, clinical practice, relationship-centred practice, leadership and professionalism.

The Emergency Nursing program combines 13 months of part-time study with clinical education and recognizes prior learning based on each student's experience. The self-study approach means nurses from all across the province can access this learning.

Like the other programs, the Emergency Nursing program is available to RNs provincewide. "In fact," Donna Denney, director, adds, "the centre is open to having learners from other provinces if the need is there."

Contact Sheila Paris for more information about the Emergency Nursing program by calling (902) 473-2175 or by e-mail at sheila.paris@cdha.nshealth.ca ■

Keeping Nurses' Skills Current

Nurses at Soldiers Memorial Hospital in Middleton also benefited from nursing strategy funds that were set aside for continuing education.

Edith Menzies, director of health programs for Annapolis Valley Health, explains that an entire nursing unit from Soldiers Memorial received training to build their competence with intermediate care patients.

"The training allows nurses to provide more in-depth nursing care for acute care patients, such as cardiac monitoring and EKG interpretation. It elevates their competence from a general medicine unit to being more able to monitor patients' conditions."

Additionally, a group of nurses from three other hospitals within the district learned practical patient care methods and trauma skills during a weekend-long Trauma Nursing Core Course.

It is obvious that keeping skills current is an important part of nursing in the Annapolis Valley. ■

Creating a Better Workplace

A philosophy supported by Nova Scotia's Nursing Strategy is that work environments that support nurses in providing quality nursing practice create healthier patient outcomes. As well, this positive environment promotes the health and well-being of nurses.

Capital Health, with funds from the nursing strategy, hosted a two-day retreat last fall with 121 participants, the majority of whom were staff RNs and LPNs.

During the retreat, the nurses discussed nursing practice within the district, and developed a vision for excellence in nursing practice, the concept of patient-family-centred care, and strategies for action.

Four strategic directions came out of the retreat - professional practice, quality of worklife, career development, and research.

Another outcome was the formation of a District Nursing Advisory Council. Made up of 20-25 RNs and LPNs, the council will provide a forum for dialogue and collaboration, and it will provide leadership and decision-making related to professional practice. The council will be the voice to promote and support excellence in nursing practice throughout Capital Health.

Next steps will include monthly council meetings through to fall 2003. Team building, problem solving and leadership skills will be integrated as the council develops, and a second retreat is planned for June 2003.

For more information, contact Mary Ellen Gurnham at Capital Health, (902) 473-7937. ■

Continuing Education Opportunities

A primary thrust of the nursing strategy is support to practicing nurses by giving them professional development opportunities to upgrade their skills in an ever-changing health-care system. With funding from the nursing strategy, 11 LPNs from Nova Scotia and two representatives of the College of Licensed Practical Nurses of Nova Scotia attended the 2002 National Nursing Conference in Manitoba in September 2002.

Diane Cole, an LPN at the Victoria General site of Capital Health, attended the "Emerging Trends and Opportunities" conference. She learned first hand about the direction of nursing in Canada, particularly as it relates to LPNs and their roles.

"The situations vary from east to west, and I wanted to bring some fresh ideas and current knowledge back to my workplace," she says.

Diane learned, for example, that Manitoba had removed LPNs from delivering acute care and later reversed that decision, and that Alberta had expanded the scope of practice for LPNs.

"It helps to know these provinces have been through some reform already and demonstrates that change can work here too."

Diane adds, "I know change doesn't happen overnight but it is under way. I came away feeling inspired about my role as an LPN."

Linda Sibley, LPN, of Middle Muquodoboit also attended the conference and echoes Diane's comments. "I learned a great deal and it was excellent to meet other LPNs and realize we all deal with similar issues. Yes, it will take time but I'm optimistic that change is happening, and the outcomes will be good for nurses and their patients."

In one of the conference sessions, staff from Pittsburg, Pennsylvania, explained how their facility has increased the scope of practice and uses LPNs to carry out a variety of duties. Linda says, "That hospital's willingness to teach and the LPNs' desire to learn was encouraging. We need more skill in some facilities. The important thing is we're all nurses and we want to work to our full potential." ■

Capital Health (QEII site) LPNs L-R: Debbie White, Lauralee Kennedy, Diane Cole, Tanya Barkhouse.

Renewal

Renewal programs are an important part of the overall nursing strategy. They support the other two "Rs" by bringing new ideas and a new energy into the work environment. A "healthy" workplace is attractive for retaining and recruiting nurses. Here are some examples of renewal activities in Nova Scotia during 2002-03.

Tomorrow's Nursing Leaders

Leadership development was a key priority that the Provincial Nursing Network wanted to support in 2002-03. This resulted in planning for the 21st Century Leadership: New Rules, New Roles for Nurses conference for April 2-4, 2003.

The success of early registration is validation that nurses indeed have a great appetite for learning opportunities. As of early March, the roster was full with 335 registered nurses, licensed practical nurses, health-care managers and educators.

Over the three days, panel discussions, keynote speakers and break-out sessions will address some critical issues and opportunities facing the nurses of the 21st century. The conference will also present a unique opportunity for networking among Nova Scotia's nursing leaders. This conference will set the stage for future leadership development opportunities.

The conference is a joint effort of the College of Registered Nurses of Nova Scotia, College of Licensed Practical Nurses of Nova Scotia and the Department of Health. ■

Role Enhancements - Toward Optimum Scopes of Practice

Maximizing the scope of practice for nurses can lead to greater professional and patient satisfaction. It can significantly improve how nurses feel about their roles in patient care.

Sheila Scaravelli, vice president of Patient Care Services, explains how RN and LPN role enhancements at the Pictou County District Health Authority allows nurses the opportunity to use their skills to the fullest extent.

"The role of RNs and LPNs is growing in response to the changes in client needs and within the health-care system. These factors require different skills and approaches, and to address the challenges more effectively requires having the right competency base. This means doing the right things for the right clients at the right times to achieve the right outcomes."

Sheila says that's why Pictou County DHA is looking to re-model the approach to health services delivery. "We need all players to consider the continuum of care in their practice. Acute care is a vital component of that continuum and can do a great deal to support primary health and health improvement."

"The demands on the nursing profession will continue to grow as we try to respond to the realities of human and fiscal constraints. The way of the future is the primary health care model, working with families and communities to maximize their health potential. Knowing that, we need to maximize and support the scope of practice for LPNs and RNs."

Sheila adds Pictou County DHA is in the very early stage of ensuring LPNs have more theory and opportunity for practice in selected functional areas which are currently the exclusive domain of RNs in acute care practice. "We are starting with professional development workshops and supporting LPNs in becoming certified in Pharmacolgy and Physical Assessment."

"At the same time, we want our RNs to take on a stronger role in co-ordinating care and facilitating interdisciplinary decision-making and evaluation of care outcomes. To that end, the nursing strategy will finance some costs for professional development, and we've used the strategy to replace nurses who are continuing their education." ■

Changing for the Better

Who better to identify issues affecting the quality of the working environment for nurses than the nurses themselves?

That's the concept behind the Practice Environment Collaboration Program™ (PECP™), an innovative program through which RNs, LPNs and their employers work together to create healthy work environments.

Since the program was successful for Ontario nurses, funding from Nova Scotia's Nursing Strategy was used to secure the licence to use the PECP™ model here.

Launched in 1999, the PECP™ program has been embraced by the Hants Community Hospital in Windsor and Roseway Manor Incorporated in Shelburne, among others.

Hants Community Hospital, which has just completed its orientation workshop, becomes the first acute care facility and the first facility in the Capital Health district to begin the PECP™ process.

Sherry Parker, health services manager for Acute and Ambulatory Care at the Hants Community Hospital says, "We have an enthusiastic team of RNs and LPNs. Once the facility's nurses are surveyed in June, the PECP™ process will move forward."

We introduced the nurses at Roseway Manor in last year's Nursing Strategy Update. They have been participating in the PECP™ program since its earliest days. Sharon Callan, Roseway's director of care, says "PECP™ is helping to create a more positive environment, and it's helping our nurses identify their professional development needs and create individual development profiles."

For more information about PECP™, contact Julie Gregg at the College of Registered Nurses of Nova Scotia at (902) 491-9711, ext. 226. ■

Funding to Support Nurses 2001-2006

	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	TOTAL
Nursing Advisor, Nursing Strategy	$5.1 M	$5. 1 M	$5.2M	$5.2 M	$5.2 M	$5.2 M	$31 M
Training More Nurses	$3.2 M	$3.7 M	$4.8 M	$5.0 M	$5.3 M	$5.6 M	$27.6 M
Total	$8.3 M	$8.8 M	$10 M	$10.2 M	$10.5 M	$10.8 M	$58.6 M

One Nurse's Story of Retention, Retraining, and Personal Renewal

Donna Hebb is a registered nurse at the Queen's General Hospital in Liverpool. Her journey to become a registered nurse is markedly different from most.

Donna became an RN last October, in the same year her daughter Rachel received her Bachelor of Nursing degree from St. Francis Xavier University. Funding from Nova Scotia's Nursing Strategy was used to pay for Donna's textbooks and tuition fees. Here is her story.

"I worked as an LPN for nearly 25 years while raising my daughters, Nicki and Rachel.

Working as an LPN for so many years was very fulfilling and I enjoy bedside nursing, but I felt a thirst for knowledge. I have a big desire to want to know more, to increase my skills. I wanted to better understand and help patients.

With both daughters settled at St. Francis Xavier University, I turned my attention to qualifying for nursing school. For two years, I traveled to Halifax to attend night classes at Queen Elizabeth High School to upgrade my math, biology and chemistry to Grade 12 levels.

In 2000 I applied to nursing school in Windsor, Ontario, where my previous LPN experience allowed me to complete the three-year program in two years.

Working now as an RN at Queen's General Hospital, I have absolutely no regrets despite the challenges and sacrifices it took to become an RN. Every day I go to work and continue to learn. It's wonderful."

In a March 2003 announcement, the nursing strategy opened 10 seats at St. FX. for LPNs to become RNs in a shorter period of time.

PNN Members

Paulette Babin, DHA 2
Evelyn Schaller, DHA 8
Mary Ellen Gurnham, DHA 9
Sheila Scaravelli, DHA 6
Cheryl Howell, DHA 5
Anne Yuill, Eastern Region VON for Home Care
Anne Erly, Department of Health
Carolyn Moore, CRNNS
Ann Mann, College of Licensed Practical Nurses of NS
Ellen MacFarlane, St. FX University School of Nursing
Dr. Barbara Downe-Wamboldt, Dalhousie University School of Nursing
Michelle Kucey, Nova Scotia Community College
Donna Denney, Registered Nurses Professional Development Centre
Janet Hazelton, Nova Scotia Nurses Union
Martha Brown, NSGEU
Heather Jewers, St. Martha's Regional Hospital
Sara Campbell, IWK Health Centre
Barb Oke, Department of Health
Peggy MacNeil, Port Hawkesbury Nursing Home
Kathy MacNeil, The Cove Guest Home

Alternates

Clare MacNeil, DHA 1
Liz Millett-Isenor, DHA 7
Janet Knox, IWK Health Centre
Susan MacEachern, DHA 4
Patti Dexter-Peck, DHA 3
Heidi Greek-Hilchie, VON for Home Care
Albert MacIntyre, College of Licensed Practical Nurses of NS
Linda Hamilton, College of Registered Nurses of NS
Dr. Joan Evans, Dalhousie University School of Nursing
Pam Reid, Nova Scotia Community College

Nova Scotia's Nursing Strategy is available at www.gov.ns.ca/health/reports

If you have questions about the strategy, please contact Barb Oke, Nursing Policy Advisor at (902) 424-5881 or okebm@gov.ns.ca

NOVA SCOTIA
Department of Health